UTILITY Attorney-Docket No. 246027US20 **PATENT APPLICATION** First Inventor or Application Identifi

TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))

Title AUTOMATED METHOD AND SYSTEM FOR ADVANCED CLASSIFICATION OF MEDICAL IMAGES AND LESIONS

ier	Maryellen L. GIGER, et al.	ρ	
D S	YSTEM FOR ADVANCED NON-PARAMETRIC	- မိ	

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents	Commissioner for Patents ADDRESS TO: Mail Stop Patent Application Alexandria, Virginia 22313			
1. Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)	ACCOMPANYING APPLICATION PARTS			
1	7. Assignment Papers (cover sheet & document(s))			
2. ■ Specification Total Sheets 18	8. Application Data Sheet. See 37 CFR 1.76			
	9.			
3.	10. ☐ English Translation Document (if applicable)			
	11. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations (4)			
4. Oath or Declaration Total Pages	12. Preliminary Amendment			
a. Newly executed (original or copy)	13. White Advance Serial No. Postcard			
b. Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation/divisional with box 17 completed)	14. Certified Copy of Priority Document(s) (if foreign priority is claimed)			
 DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b). 	15. Applicant claims small entity status. See 37 CFR 1.27			
5. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	16. ☐ Other:			
6. ☐ Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. ☐ Computer Readable Form (CRF)	·			
a. LJ Computer Readable Form (CRF) b. Specification or Sequence Listing on :				
i. CD-ROM or CD-R (2 copies); or				
ii. Paper				
c. Statements verifying identity of above copies				
 17. If a CONTINUING APPLICATION, check appropriate box, and supplied ☐ Continuation ☐ Divisional ☐ Continuation 				
Prior application information: Examiner:	in-part (CIP) of prior application no.: Group Art Unit:			
	·			
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.				
18. CORRESPOND	ENCE ADDRESS			
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Docket No.

246027US20

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Maryellen L. GIGER, et al.

SERIAL NO:

New Application

FILING DATE: Herewith

FOR:

AUTOMATED METHOD AND SYSTEM FOR ADVANCED NON-PARAMETRIC CLASSIFICATION

OF MEDICAL IMAGES AND LESIONS

FEE TRANSMITTAL

COMMISSIONER FOR PATENTS ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED	NUMBER EXTRA	RATE			CALCULATIONS
TOTAL CLAIMS	7 - 20 =	0	х	\$18	=	\$0.00
INDEPENDENT CLAIMS	3 - 3 =	0	х	\$86	=	\$0.00
☐ MULTIPLE DEPENDENT CLAIMS (If applicable)			+	\$290	=	\$0.00
■ LATE FILING OF DECLARATION			+	\$130	=	\$130.00
BASIC FEE				\$770.00		
TOTAL OF ABOVE CALCULATIONS				\$900.00		
☐ REDUCTION BY 50% FOR FILING BY SMALL ENTITY			\$0.00			
☐ FILING IN NON-ENGLISH LANGUAGE			+	\$130	=	\$0.00
☐ RECORDATION OF ASSIGNMENT			+	\$40	=	\$0.00
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Ш	Please charge Deposit Account No. in the amount of \$0.00 A duplicate copy of this sheet is enclosed.
	A check in the amount of \$0.00 to cover the filing fee is enclosed.
	Credit card payment form is attached to cover the filing fee in the amount of \$0.00. The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check or credit card payment is enclosed herewith, or credit any overpayment to Deposit Account No.

Respectfully Submitted,

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